

Qualified Brain Injury Professional (QBIP) Sign Off Sheet

Completion of this manual is required within 12 months of hire. Completion must be indicated on the QBIP Sign Off Sheet. In addition, the New Employee Orientation (for new employees only) and the Acquired Brain Injury Certification training must be completed to become QBIP certified.

Support Coordinators:

Please sign off each module after you have worked through it and discussed any questions and/or concerns with your supervisor or the Acquired Brain Injury (ABI) Program Manager.

Supervisors:

Please sign off each module after you have discussed the information included in this Manual with the Support Coordinator and you are comfortable with their general knowledge of the information contained therein.

Please send the completed form to:

Division of Services for People with Disabilities
Training Specialist
120 North 200 West # 411
Salt Lake City, UT 84103

Please note:

Support Coordinators will not be certified as (QBIP) until this form is submitted to the Training Specialist

Once this sign off sheet has been submitted, and the Support Coordinator has completed his/her other training requirements (certification sessions, Department's New Employee Orientation if necessary) the Support Coordinator will be able to take the QBIP Certification Examination.

| Module # | Name of Module | Date Completed | Support Coordinator Signature | Supervisor Signature |
|----------|--|----------------|-------------------------------|----------------------|
| I | A Rocky Road- Living with Brain Injury | | | |
| II | An Orientation | | | |
| III | ABI Eligibility Determination | | | |
| IV | Comprehensive Assessment and Manual | | | |
| V | Neuropsychological Assessments | | | |
| VI | Brain Injury and Substance Abuse | | | |
| VII | Rehab, Treatment, and Person Centered Planning | | | |
| VIII | A Guide for the Consumer | | | |
| IX | Glossary of ABI Terms | | | |
| X | Sample Exam | | | |